1940 No.\_\_

#### **BURIAL (OR REMOVAL) PERMIT**

Stud to be retained by officer issuing permit
Issued to William M Tighe
Issued to William M Tighe Name of deceased Kathorine a Hours
Age 77 years 10 months days
Place of death Main St
Date of death Jana. 1946
Cause of death Carcinnuma of Merus
Interment at Rural
Date permit issued Jan 3. 1940
Certified by Frank & Piper M.D.

BY.			
EVO.			

This Coupon to be returned immediately, properly endorsed,

to Board of Health	
City or Town of Southbots	Mass.
Name of deceased Katherine a. Larelle 3	Houses
If a U.S. War Veteran, specify what war, organ	nization,
etc	

#### **ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

RURAL CEMETERY, Southboro, Mass.
(Name of cemetery or crematory)
on January 4, 1940,
Certified by Valter M. C. Lull. (Signature of Superintendent, cemetery/or crematory)

	9
No	6

Issued to Pruing A. Harfer
Name of deceased Carterney D. Leary
Age 7/ years months days
Place of death Latergream Rs. Southbard
Date of death Jan. 5, 1940  myscaraitis, chr.  Cause of death arthrioscelerasis, chr.  bleast
Cause of death Arthrioxellrasis Christian Cause
Interment at St. Lukes Cemelery, Southbar
Date permit issued Jan. 7/948
Certified by Raland & DewtoxM.D.

	0
No	4

This Coupon to be returned immediately, properly endorsed,

to Brand of Health (Office issuing permit)	
(Office issuing permit)	
City or Town of Southbow	Mass.
Name of deceased Carterine Mr. Lea	ry
If a U. S. War Veteran, specify what war, organ	(/
etc.	

#### **ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at St. Luke's Cem., Westboro
(Name of cemetery or crematory)
on Jan. 8, 1940
Certified by (Rev.) J. E. Doherty
(Signature of Superintendent cometery or cromatory)

No.\_\_\_\_\_

#### **BURIAL (OR REMOVAL) PERMIT**

Issued to Summer C. Gage
Name of deceased Caroline Lois (Ball) William
Age 93 years 6 months 21 days
Place of death Main Sty Southboro
Date of death 2-10-40  Covonaine Occlusion of heart  Cause of death Arberro Scherosi's
Interment at Royal Cemetany - Southbore
Date permit issued 2-12-40
Certified by C. W. Smith M.D.

	11
No	+

## BURIAL (OR REMOVAL) PERMIT This Coupon to be returned immediately, properly endorsed,

to Board of Health

(Office issuide permit)

City or Town of Southbow Mass.

Name of deceased Caroline Lois (Ball) Williams

If a U. S. War Veteran, specify what war, organization,

etc.

#### **ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at RURAL CEMETERY, Southboro, Mass.
(Name of cemetery or crematory)

February 14, 1940.

Certified by Salter Of Superintendent, genetery or crematory)

(Signature of Superintendent, temetery of crematory)

No	 

Issued to William M. Tigh
Name of deceased Caroline (Onthanh Gruld
Age 74 years wonths days
Place of death Boston Rd Southborn
Date of death Feb 15, 1940
Cause of death Commany Sclerosis
Interment at Rural Southboro
Date permit issued Feb 16, 1940
Certified by Walter F Makoney M.D.

	permany	
	0	
Ma	1	
240	1/4	b

This Coupon to be returned immediately, properly endorsed,

City or Town of Southborn Mass.

Name of deceased Caroline (Ontlank) Sould

If a U. S. War Veteran, specify what war, organization,

etc.

#### **ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at RURAL CEMETERY, Southboro, Mass.
(Name of cemetery or crematory)

February 17. 1940.

on 11. 1540

Certified by

(Signature of Superintendent, cemetery or grematory)

	0
No	8

000
Issued to John J. Brown
Name of deceased Elizabeth H. Daughan
Age 72 years 3 months — days
Place of death Calinguama Rd Southbor
Date of death March 8-1940
Cause of death Bronicho Prewmonia
Interment at Purul Cemitary
Date permit issued March 91940
Certified by . Merrile Olson M.D.
Certified by . Merrice Will M.D.

	OX	
No	X	
ATU I mount	-	

This Coupon to be returned immediately, properly endorsed,

to Board Of Health	
City or Town of Southboro	Mass.
Name of deceased Elizabeth H. Dan	ghan
If a U. S. War Veteran, specify what war, organic	zation,
etc.	

#### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at	Rural	Cem	etery,	Southbor	o, Mass.
		(1)	lame of cemet	ery or crematory)	
on	March	10,	1940.		
Cer	tified by	Wa	elter	m. O	1/1/1.
		(Sign	nature of Supe	rintendent, cemeter	y or crematory)

No	6	

Issued to William M Tigh
Issued to
Name of deceased Infant Bay Borszcz
Age
Place of death Tumpike Rd Fragnelle
Date of death Feb 27. 1940
Cause of death Stillbern
Interment at Rural Southbern
Date permit issued Fish 27, 1940
Certified by Poter P Cottone M.D.
Certified by M.D.

	/
No	6

## BURIAL (OR REMOVAL) PERMIT This Coupon to be returned immediately, properly endorsed,

City or Town of Southboro Mass.

Name of deceased Mark Bay Bars ZCZ

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Southboro, Mass

(Name of cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

Signature of Superintendent, cemetery of grematory)

	7
Vo	

Issued to J. F. Callanian & Son
Name of deceased William O'Brien
Age 76 years months days
Place of death Southville and Southville
Date of death Murch 2.1940
Cause of death Coronary Selerosis
Interment at A John's Hopkinton
Date permit issued March 3. 1940
Certified by Walter J. Mahory M.D.

	9
No	-

Issued to David Andge + Son
Name of deceased Hattie Humphry
Age 95 years 2 months 6 days
Place of death Southborn Mass.
Date of death March 9. 1940
Cause of death Chronic Myorarditis
Interment at Woodlawn (Evert Wass)
Date permit issued March 10.1940
Certified by M.D.

	5
No	

to Board (Office issuing permit)

City or Town of Mass.

Name of deceased Hattle Humphry

If a U. S. War Veteran, specify what war, organization, etc.

#### **ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

on (Name of cemetery or crematory)

(Signature of Superintendent, cemetery or crematory)

Issued to June C. Joge Name of deceased Mrs addie Ladd
Name of deceased Mrs addie Ladd
Age 70 years 5 months 12 days
Place of death Condaviese Rd. Southors
Date of death Cypric 1940
Cause of death Myocar ditis chronic
Interment at Sparing vale Cemetry Sanford Vacable  Date permit issued april 21/940
Date permit issued Cypril 21/940
Certified by Roland Newton M.D.

Issued to albert & Lavery
Name of deceased alfreda Vebroi (Chiny) andrew
Age 76 years // months 2/ days
Place of death Greenville &
Date of death Cyric 21 1940
Cause of death Cerebral Hemorrage
Interment at Rural Cemetry
Date permit issued Cepril 23.1940
Certified by H. E. Karr Grunill HM.D.

	1 0	
No	13	

This Coupon to be returned immediately, properly endorsed,	
to Board of Health	
City or Town of Southboro	Mass.
Name of deceased alfreds Velro Cheny	andrew
If a U. S. War Veteran, specify what war, organiza	ation,
etc	
Special data designation of the Administration of the Administrati	
	~

#### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this

permit was disposed of in accordance with its terms Certified by (Signature of Superintendent, cemetery

## BURIAL PERMIT

Greenville, , N. H., April 22, 19 40
Permission is hereby given Albert J. Lavery
to remove the remains of Alfreda Velroi (Cheney) Andrews
from Greenville, N.H.
to Southboro, Mass. for interment in
Cemetery, April 23, , 1940
Date of Death, April 211940 Age, 76 years, 1 months, 21 days.
Place of Death, Greenville, N.H. No.
Street, Hubbard Road Ward,
Cause of Death, Cerebral hemorrage
Contributing Cause, Gerebral Arterio Sclerosis
Medical Attendant, H. E. Karr, M. D.
This permit does not in any way release the undertaker, or person acting as such, from the requirements of the regulations of the State Board of Health governing the transportation of corpses, or from the rules or orders issued by the boards of health for the protection of the public against infectious and contagious diseases.
No. 4 Aussy Local Registrar.
THIS CERTIFIES that the conditions of this Permit have been
lawfully complied with.
Cilbert V. Lavery, Undertaker.
[OVET]

Issued to Minthesp 9. Hockwell
Name of deceased Millian Carell
Age 79 years 10 months 2 3 days
Place of death a lesquama II
Date of death // / / / / / / / / / / / / / / / / /
Cause of death Trims Personal Commence
Interment at Agelaum Malula
Date permit issued 19940
Certified by A. M. M.D.

A	11
No	

This Coupon to be returned immediately, properly endorsed,

to Brace (Office issuing permit)
City or Town of Couch low Mass.
Name of deceased Milliam ( Fourte
If a U. S. War Veteran, specify what war, organization,
etc

#### **ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Ridge	aure	Waterlown
(Nar	ne of cemetery or cre	ematory)
18,	2	12011 6
on stay .	7	1940
1	. •	1
Certified by Jan	n D	Horlore.
(Signat	ure of Superintender	it. cemetery or crematory)

City or Town of

- 27	
No	-

Mass

## BURIAL (OR REMOVAL) PERMIT This Coupon to be returned immediately, properly endorsed,

Name of deceased If a U. S. War Veteran, specify what war, organization, etc.\_ ENDORSEMENT (To be filled in by cemetery or crematory official) I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

nature of Superintendent, cemetery or crematory)

No. 15

#### **BURIAL (OR REMOVAL) PERMIT**

Issued to J. O. Coolsson
Name of deceased Front 13. Henney
100
a-10-120 gr. 11
Place of death Central & 1. They wille
Date of death Seneral Terror Cleronis of
Cause of death trabelly Mellilus
Interment at first Cemeley - Somewhere
Date permit issued 70 23 17 75
Certified by amond of Johnson M.D.
101 of the state of the

No. 10	
The state of the s	-

This Coupon to be returned immediately, properly endorsed,
to Book of Scattle
Conce issuing permits
City or Town of Joulhor Mass.
Name of deceased Drock 17. Munesly
If a U.S. War Veteran, specify what war, organization,
V
etc.
Medical and control of the control o

#### **ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at	Rur	1 0	emetery,	Southboro,	Mass.
			(Name of cemet	ery or crematory)	
on	May	33,	1940.		
Cer	tified b	у	Lastu Signature of Super	M. Of	lutal.

Issued to Termon E. Morrill
Name of deceased Densh O, Fuller
Age 77 years — months // days
Place of death Oak Hill Road
Date of death June 3, 1940
Cause of death Carcinoma of Liver
Interment at / Cural-South baro
Date permit issued June 4, 1940
Certified by Sane M.D.
ashland

This Coupon to be returned immediately, properly endorsed,

to Southborro - mass

(Office issuing permit)

City or Town of	Mass.
Name of deceased Denah O Ful	ler
If a U.S. War Veteran, specify what war, o	organization,
etc.	

#### **ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at RURAL CEMETERY- DOUTHBORD, MASS
(Name of cemetery or crematory)
on x SUNE 6, 1940.
Certified by Walter M. Offitt.
(Signature of Superintendent, cemetery of crematory)

Issued to Irving M. Harper
Name of deceased Ellen J. Cederhalm
Age 69 years // months /7 days
Place of death Sauthbard, mass.
Date of death June 6, 1940 Myocaractio Chronic Cause of death archival Aranchial
Interment at Forest Stills Cremelary
Date permit issued Jene 6, 1940
Certified by Baland S. Dewlon M.D.

No.\_\_18

#### **BURIAL (OR REMOVAL) PERMIT**

Issued to J. S. Weeterway & sous Boston Mass
Name of deceased Plorence 14. Barber
Age 75 years 7 months 10 days
Place of death Cordavelle Rd Southboro
Date of death July 10-1940
Cause of death Gardiae Decomplusation
Interment at Rural Cem. Sou Thoro
Date permit issued July 10 1940
Certified by T & Carnicelli M.D.

This Coupon to be returned immediately, properly endorsed,
10 Board of Health
(Office issuing permit)
City or Town of Jouthelos Mass.
Name of deceased Thorong H. Barber
If a U.S. War Veteran, specify what war, organization,
etc
Makes grantening grantening production for the state of t
ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at RURAL CEMETERY, SOUTHBORD, MASS. (Name of cemetery or crematory)
(Name of cemetery or crematory)
on July 12, 1940.
), 5
Certified by Signature of Superintendent (Superintendent)

Issued to Walter M. Office	
Name of deceased Buly Barba	
Age years months day	S
Place of death Southfor	
Date of death	un Mana
Cause of death	
Interment at Rural Cemetry	
Interment at Rural Cemetry  Date permit issued July 11, 1940	
Certified byM.D	).

This Coupon to be returned immediately, properly endorsed,
to Southbres Boardoffes
(Office issuing permit)
City or Town of South Mass.
Name of deceased (Baby) Barber
- /-
If a U.S. War Veteran, specify what war, organization,
etc
and the second second second second
ENDODGENERA

#### **ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

on 141,1940
Certified by Halter M. Exfect of

If there is no officer in charge, undertaker should sign and return this stub.

(Signature of Superintendent, cemetery or crematory)



#### OFFICE OF

# THE CEMETERY COMMISSIONERS SOUTHBOROUGH, MASSACHUSETTS

July 11, 1940

Board of Health, Southboro, Mass.

Gentlemen:

Attn. - Mr. James Telfer.

Will you please issue a permit to disinter, remove and reinter the remains of (Baby) Barber, from the Grave now occupied to a new location in the Barber lot.

We have received authorization for this transfer from the legal custodian of the remains.

Very truly youes,

THE CEMETERY COMMISSIONERS

Walter M. Offutt, Supt.

Issued to J. F. Calleman & Son.
Name of deceased Duniel E. O'Keill
Age 67 years — months — days
Place of death Corduville Huss
Date of death rule 13. 1970
Cause of death Coronary Solerosis
Interment at St plins Hopkinton Mass
Date permit issued July 13. 1940
Certified by Killiam B. Class. M.D.
no Grafton Vice

This Coupon to be returned immediately, properly endorsed,

to Southboro Consultation Mass.

City or Town of Southboro Mass.

Name of deceased Southboro Mass.

If a U. S. War Veteran, specify what war, organization, etc.

#### **ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Sk. Johns Cemetery
(Name of cemetery or crematory)
on July 15, 1940
of .
Certified by onner Orcen
(Signature of Superintendent, cemetery or crematory)

Issued to Symmer C. Agge
Name of deceased Joseph Lukke Jensen
Age 90 years 4 months 0 days
Place of death Newton St.
Date of death August 8, 1940
Cause of death arteriosclerosis
Interment at Rural Cemetery
Date permit issued Aug. 8, 1946
Certified by Clyde Muriel M.D.

BY.	
IVO	

to Southboard grand of Mass.

City or Town of Southboard Mass.

Name of deceased South Andrew War, organization, etc.

### **ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at RURAL, CENIETERY, SOUTHBORD, NAS	
(Name of cometery or crematory)	-
( Comments of the comments of	
on august, 11, 1940,	
Val Sal Oll	
Certified by Walter M. Offutt,	
(Signature of Superintendent, cemetery or crematory)	
011	

# **BURIAL (OR REMOVAL) PERMIT**

Issued to Summer C. Stage
Name of deceased Walds Burnett Fay
Age 8/ years 10 months / days
Place of death Southborn Mass.
Date of death Oct 16, 1940
Cause of death Pulmonary Edema
Interment at Parral Cerutary
Date permit issued Oct 17, 1940
Certified by Hugh Follow M.D.
Certified by M.D.

No	2	-3	
440.	-		

This Coupon to be returned immediately, properly endorsed,

to Board Of Health	
(Office issuing permit)	
City or Town of Southboro	Mass.
Name of deceased Wolds Burnett Fay	
A. A.	
If a U.S. War Veteran, specify what war, organize	ation,
ata.	
etc.	

# **ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

Rural	Cametary,	Southboro,	Mass.
Www.adagarananapara.co.acc.com	(Name of cem	etery or erematory)	andra de Praditinos II de vascina influeri don trias droid mis-drightenigh i seathfalla.
on Oct	ober 18, 1	940.	
Certified by	Valter	M. Office	4)
oci villou by	(Signature of Sup	perintendent, cometery or	r crematory)

No. 25

# **BURIAL (OR REMOVAL) PERMIT**

Issued to Clevence B. Haff
Name of deceased Carrie S. Cantello
Age \$5 years 7 months 29 days
Place of death 16ebron Maine.
Date of death Nov. 7, 1940.
Cause of death Coronary occlusion asterius sclesesis
Interment at Rural Cemtary
Date permit issued Nov. 7, 1940
Certified by D.M. Stewart M.D.

# STATE OF MAINE

# BURIAL PERMIT

Me hereby given Clause B. Hould	to remove and bury the remains of Carrie & Cantella in Cometery, Town of Godhlyng Mass	Date of Death Nov. 7, 19. , Age 86° years 2 months 29 days Place of Death Melenn Wee, Street	Cause of Death Loranan occlusion Arturn adhoris	Medical Attendant L. M. Stewart	123 E. E. Gohnson City or Town Clerk	(Over)
Permission	to remove in	Date of De	Cause of 1	Medical At	No. 12	

This Coupon to be returned immediately, properly endorsed,
to Doard of Wealth
City or Town of Southboro Mass.
Name of decease Parries Dantello
If a U. S. War Veteran, specify what war, organization,
etc
ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Sural Cemellouf

on Continue of cemetery or crematory)

on Certified by Saltu M. Charles

(Signature of Superintendent, cemetery or crematory)

Issued to Summer & Gage
Issued to Summer O. Jage
Name of deceased Martha Wilson Whitehorn
Age 88 years 4 months 10 days
Place of death Main Street
Date of death Lec, 27, 1948
Cause of death arterio-sclerosis general
Interment at Rural
Date permit issued Dec 28, 1940
Certified by M.D.

this Coupon to be retained immediately, properly endorsed,
to Board of Health (Office issuing permit)
City or Town of Southbort Mass.
Name of deceased Martha Okilson Whitehorn
If a U. S. War Veteran, specify what war, organization,
etc.
And the second s
THE CONTROL OF THE

### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southboro, Mass.
(Name of cemetery or crematory)

on December 29, 1940.

Certified by

(Signature of Superintendent, cemetery or crematory

No.\_\_\_\_/

# BURIAL (OR REMOVAL) PERMIT

Issued to Um. a.
Name of deceased Clayton L. Slade
Age years months days
1150 yours and 1150 yours
Place of death Windson Pl. X.Y. City
Date of death Dec. 29.40
Cause of death Corough
0 0
Interment at Vour al Cemetry
Date permit issued anwary 1. 1741
Certified by Otto K. Pozdena M. D.
Wolvedson Vel. M. G. Col

This Coupon to be returned immediately, properly endorsed,

to 3 o and Health

(Office issuing pyrmit)

City or Town of Southborn Mass.

Name of deceased Claytrue Relacte

If a U. S. War Veteran, specify what war, organization,

etc.

# **ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southboro, Mass.
(Name of cometery or crematory)

on January 3, 1941.

Certified by Signature of Superintendent, compery or crematory

the keeper of the Cemetery or Crematory by the Funeral Director

# DEPARTMENT OF HEALTH OF THE CITY OF NEW YORK

# BURIAL OR CREMATION PERMIT

in charge of the funeral.	New York, V/40 (19
The Certificate of Death	ing been furnished to this Department, as required by the Sanitary Code, permission is
hereby given to	a fly 361 - Janes
to remove the remains of the	Aged 9 Yrs, Mo Days,
who died at	Mundan Ple Borough of Mely
City of New York, on	Malu 19 from Afre
Cremation*	golles the same
For Burial* at	LOTOP SUMMER STORES
Cause of Death LCION	Egyley (Mass) M.D.
* Cross out one	Assistant Registrar of Records.

1941.

No.\_\_\_\_\_\_\_\_

# BURIAL (OR REMOVAL) PERMIT

8 00
Issued to Summer C. Luge
Name of deceased Harold W. Stivers
Age 43 years 5 months 27 days
Place of death Southboro Mass
Date of death Danuary 27-1941
Cause of death alenkemic - Lenkemia
Interment at Rusal Cernitory
Date permit issued January 29-1941
Certified by . Merrice Olson. M. D.

No. 2

### BURIAL (OR REMOVAL) PERMIT

This Coupen to be returned immediately, properly endorsed,

to Source issuin permit)
City or Town of Fourthboro Mass

Name of deceased Horold W. Stevers

If a U. S. War Veteran, specify what war, organization, etc.

### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southboro, Mass.
(Name of cemetery or crematory)

January 29, 1941\*

Certified by Walter M. Office (Signature of Superintendent, cemetery or Frenchtory)

No.\_\_\_\_3

# BURIAL (OR REMOVAL) PERMIT

Issued to WM. M. Tighe
Issued to
Name of deceased Mary L. Liggerald
Name of deceased Mary V. Vill quald
Age 77 years months days
Place of death Southfor Mass
Date of death January 29. 1941
Cause of death Chronic Vascular Nephritis Chypertensess Interment at Rural Country
C humateura
Interment at Vieral Cemetery
2 19.11
Date permit issued January 36. 1941
Certified by Hugh Folsom. M. D.
Certified by Hugh Tollone. M. D.
U

	3
No	

This Coupon to be returned immediately, properly endorsed,

to Branch of Health	
(Office suring permit)	
City or Town of Southboro	_Mass.
M. LITTON	
Name of deceased Mary J. Thegerald	

If a U. S. War Veteran, specify what war, organization, etc.

### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at_	Rural	Cemet	ery,	Southboro,	Mass.
		(Name	of cemet	ery or crematory)	
on_	Februa	ry 1,	194	l.	
<b>C</b>	120 - 1 1	Halte	2/	110115	the second
Cer	tified by	ignature of Su	perintend	ent, cemetery or comatory	7)

# BURIAL (OR REMOVAL) PERMIT

Issued to Driving W. Harper
Name of deceased John Spurrowk
Age 86 years 6 months 18 days
Place of death Southville Southborn Muss
Date of death Feb. 1, 1941  Myscaraits, chronic  Cause of death Propoler preumonia
Cause of death Prouder preumonia
Interment at Paral Cemetery
Date permit issued February 3. 1941
Certified by Roland & newton M. D.

	1
No.	7.

This Coupon to be returned immediately, properly endorsed,

to Board of Health	
(Office issuing permit)	
City or Town of Southbow Mass. Mr	ass.
Olan Consol	
Name of deceased	
If a U. S. War Veteran, specify what war, organization,	etc.

### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at_	Rural Cer		Southboro,	Mass.
		(Name of cemet	ery or crematory)	
on	February	4, 194	1.	
Cer	tified by	alter	ent, cemetery or cromptor	with
	(Signatur	of Superintend	ent, cemetery or cremator	у)

No

Issued to Summer O. Dage
Name of deceased Isabelle L. Kinlock Onthank
Age 79 years 7 months 12 days
Place of death Tayville Southborn, Maso,
Date of death Tetr 5, 1941
Cause of death Oronary Sclerosis
Interment at Rural Cemetery
Date permit issued Teb. 6, 1941
Certified by Walter F. Mahoney M. D.

Name of deceased

No	3

### BURIAL (OR REMOVAL) PERMIT

This Coupon to be returned immediately, properly endorsed,

City or Town of South Of Mass.

If a U. S. War Veteran, specify what war, organization, etc.

### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

Rural Cemetery, Southboro, Mass.

(Name of cemetery or crematory)

February 7, 1941.

Certified by Caltur !!!

(Signature of Superintendent, cemetery or crematory



1941<sup>No.</sup>\_\_\_\_6

# BURIAL (OR REMOVAL) PERMIT

Issued to John J. Brown
Name of deceased Mary J. (Reynolds) Dec
Age 68 years // months — days
Place of death Fayville Mass.
Date of death February. 1941
Cause of death Coronary Selirosis
Interment at Rural Cemetry
Date permit issued February. 12 1941  Certified by Watter F. Mahony M. D.
Certified by VY all 2. Makery M. D.

No.\_\_\_6

### BURIAL (OR REMOVAL) PERMIT

This Coupon to be returned immediately, properly endorsed,

City or Town of Southton Mass.

Name of deceased Mary Reynolds Dea

If a U. S. War Veteran, specify what war, organization, etc.

### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

Rural Cemetery, Southboro, Mass.

(Name of cemetery or crematory)

February 13, 1941.

Certified by (Signature of Superintendent, cemetery of crematory)

No.\_\_\_\_\_\_\_\_

# BURIAL (OR REMOVAL) PERMIT

Issued to Richard J. Duddy
Name of deceased William Cody
Age 39 years months days
Place of death Queens Hospital Portland Main
Date of death Feb 13 1941
Cause of death Macrocustic Aumia
Interment at Rural Cemetery
Date permit issued Feb 16. 1941
Certified by Transis M. Dooley M. D.

7	
No	

This Coupon to be returned immediately, properly endorsed,

Office is uing permit City or Town of. Magg Name of deceased

If a U. S. War Veteran, specify what war, organization, etc.

### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southboro. (Name of cemetery or crematory)

Certified by

(Signature of Superintendent, cemetery or crema

# STATE OF MAINE

# BURIAL PERMIT

PORTLAND Me., 2 13 1941
Permission is hereby given Vichard J. Wurdchy
to remove and bury the remains of way.
Date of Death 2/13 19:41, Age 39 years - months days
Place of Death Process Har frite!
Cause of Death
Medical Attendant Town Clerk
No

# BURIAL (OR REMOVAL) PERMIT

Issued to Summer) 10. Sage
Issued vo
Name of deceased Edward F. Collins
Name of deceased Qaward ( . Qolumb
Age 79 years / months 20 days
Place of death Latinguama Road
Date of death April 30, 1941
Cause of death Sudden death presumably
Cause of death, Maria is constitution of
corongry sclerosis,
Interment at Kural Cemellry
01.1
Date permit issued April 30, 1941
Certified by Walter F. Mahoruy M. D.

0'	
No.	

this Coupon to be returned miniediately, properly endorsed,	
20 Health Department	
to the same of the	
(Office issuing permit)	
City or Town of Outlook	Mass.
SI 1 of 1 M.	
Name of deceased Odward Tay Collins	]
A	
If a II S War Veteran specify what war organization	etc

### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southborough, Mass.
(Name of cemetery or crematory)

Certified by Mattu Matture of Superintendent, cemetery by dematory)

R-309—42,500-10-'38. No. 5164
BURIAL (CR (REMOVAL) PERMIT) Stub to be retained by officer Issuing permit
Issued to George Cranston Name of deceased Charles F. Maynard
Name of deceased Charles F. Waynard
Ageyearsmonthsdays
Place of death
Date of death
Cause of death
Interment at Ruchlassett Memorial R.S.
Date permit issued
Certified by (James Teefer) M. B.

å,



Issued to ge Cranstre Funeral Juntor Winford R.D
Issued to Granstre Finnel Junton Winford R.D.  Name of deceased Grant Charles F. Magnard.  Age 6 (3m 1848)  Age 6 (years months days
Age 66 years months days
Place of death
Date of death 1914
Cause of death
Date permit issued They 16. 1941.
Date permit issued They 16- 1941.
Contified by M.D.

No. 9	7

This Coupon to be returned immediately, properly endorsed,

to Board Health

City or Town of Southfow Mass.

Name of deceased Charles F. Maynard

If a U. S. War Veteran, specify what war, organization, etc.

### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Quidusuth Munorial Cumiling

(Name of cemetery or crematory)

on May 17, 1941

Certified by William T. Rumblas Sunt

(Signature of Superintendent, gemetery or crematory)

R-309—42,500-10-38. No. 5164
BURIAL (OR REMOVAL) PERMIT
Issued to George Cranstre
Issued to George Cranstre  Name of deceased Frank S. Mayrard
Age
Place of death
Date of death
Cause of death
Interment at Quedressett Memorial R.J.
Date permit issued
Certified byM. D.

4	9	A	9
1	J	4	7

No.\_\_\_3/

# BURIAL (OR REMOVAL) PERMIT

Learge Eranston Funeral Director Writefors
Issued to W.M. Offit.
Name of deceased Frank S. Maynard
Name of deceased Name Q, Maynard
Bon 1876
Ageyearsmonthsdays
Place of death  Date of death  1876
Cause of death
Interment at Quadrusett Minnorial Cometry R.S.  Date permit issued May 16.1941
Certified by M. D.

m	10	4
No.		

This Coupon to be returned immediately, properly endorsed,

to	Board of )	teuttle	
	(Office issuing permit)	1	
City or Town of	Southfor	Muss	Mass
Name of deceased	Frank S.	Maina	rd.
		1	
If a U. S. War Vet	eran, specify what wa	ir, organization	n, etc.

### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Indnust Mimorial a	milen
(Name of cemetery or crematory)	. /
on May 17, 19 81	O
Certified by (Signature of Superintendent, Semetery or crem	Suht.
(Signature of Superintendent, cemetery or creme	atory)

R-309—42,500-10-'38. No. 5164 1941 No.
BURIAL (OR REMOVAL) PERMIT
Stub to be retained by officer issuing permit
Issued to George Cranstre
Name of deceased Trank M. Maynard.
Ageyearsmonthsdays
Place of death
Date of death.
Cause of death
Interment at Quednessett Memorial R. D.
Date permit issued
Certified byM. D.



1942 No. 32

# BURIAL (OR REMOVAL) PERMIT

Issued to George Cramstal Funeral Director
Issued to George Cramstal Funeral Director & Walt Offutt. Jank M. Wayhard  Name of deceased Frank M. Wayhard
_ (Born 1876)
Age years months days
Place of death
Date of death 1881
Cause of death
Interment at Quanusett Minurial Cemetry R.S.  Date permit issued May 16.1941.
Date permit issued May 16.1941.
Certified by M. D.

//	
No	

This Coupon to be returned immediately, properly endorsed,

to Stand Heatth

(Office issuing permit)

City or Town of Southboro Mass. Mass.

Name of deceased Hunk M. Mayrud

If a U. S. War Veteran, specify what war, organization, etc.

### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Quidmint Mumorial Cunting
(Name of cemetery or crematory)

Certified by (Signature of Superintendent/cemetery or crematory)

LAW OFFICES OF

### TAYLOR & FOLEY

WILLIAM H.TAYLOR
DAVID A.FOLEY
JEREMIAH J. SULLIVAN
PAUL E.MURPHY
ALFRED W. HOWES

179 SUMMER STREET BOSTON, MASS.

TELEPHONE LIBERTY 9240

March 19, 1941

Mr. James Telfer Board of Health Southborough, Massachusetts

Dear Jim:

According to the report of Dr. Francis M. Dooley of Portland, Maine, William J. Cody died of Macrocytic Anemia. Contributing causes of death were Chronic Cholecystitis, Splenitis, Pancreatitis and Seropurulent pleuritis.

Lawrence Misener asked me to send you this information.

Upled W. Trowes

\*

172 STATE STREET PORTLAND, MAINE March 15, 1941 Mr. J. F. Callanay 34 Church St. Haplinton, Mass. Dear Sir. Deceived information from City Clerk to-day, on William Lody. The report is as fallous: Crome San Creatitis and Hemosiclerosis. autopsy = Cyro- Thoias & Streptococcus Infection. Is fatient. Thanking you tagain for theing wery truly yours. Joseph R. Duddy

FUNERAL DIRECTOR

# T. F. CALLANAN

#### FUNERAL DIRECTOR AND EMBALMER

TELEPHONE 6

34 CHURCH STREET

HOPKINTON, MASSACHUSETTS

March 18, 1941.

Mr. James F. Telfer, Southboro, Mass.

Dear Sir:

Enclosed you will find the letter which I Weceived this morning from Portland, Maine Will you please write in the cause of death on the burial permit?

I received a letter February 27th saying the doctor who performed the autopsy was in the hospital very ill himself and that as soon as he was able to makes his report they would send it along.

Sorry for the delay but could not be helped.

Yours truly,

T. G. Callanaw.



#### OFFICE OF

# THE CEMETERY COMMISSIONERS SOUTHBOROUGH, MASSACHUSETTS

December 22, 1941

Mr. James F. Telfer, Board of Health Southboro, Mass.

Following are the names and dates of the bodies removed from Rural Cemetery May 16, 1941 for reinterment in a Rhode Island cemetery.

Frank S. Maynard - 1876-1876

Frank N. Maynard - 1879-1881

Charles F. Maynard 1848-1914

N. M. Offert.

Issued to John J. Brown
Issued to John Brown Name of deceased Gerthude Soff
Age 76 years months days
Southville Rd. Southford Mans
Date of death May 7, 1941  Cause of death Cerebral Harmarky
Interment at Parol
Date permit issued May 8, 1941
Certified by M. J. Cochrane M. D.

	 -	
	1.	
No	~	

to Coupon to be returned immediately, properly endorsed,
to Coffice issuing permit)

City or Town of Mass.

Name of deceased the Coupon what war, organization, etc.

#### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southboro, Mass.
(Name of cemetery or crematory)

on May 2, 1941

Certified by (Signature of Superintendent, cemetery or crematory

(Signature of Superintendent, cemetery or erematory)

.941 No. /3

# BURIAL (OR REMOVAL) PERMIT

Issued to Thomas P. Callanan & Son
Issued to homas v. Callanan Tan
Name of deceased Margaret J. Litzgerald
Name of deceased hungary, I way grand
Age 71 years months 2/ days
(01 :10 0 111
Place of death Cordaville Southborn
Date of death May, 23-1941
Cause of death Crebial Hermonhage
Interment at St Johns- Hopkinton
Interment do
Date permit issued May 25. 1941
Certified by Watte Moloney M. D.

	15
No.	10

This Coupon to be returned immediately, properly endorsed,

to Board of Health	
(Office issuing permit)	
City or Town of Southborn Mass.	Mass.
Name of deceased Margaret J. Fitzgeral	d
If a U. S. War Veteran, specify what war, organization	n, etc.

#### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at 8 t Lohn's Hopkmiton
(Name of cemetery or crematory)
(Name of Cemetery of Crematory)
on (nam 26 1941
1 Herry
Certified by James 17 July
(Signature of Superintendent, cemetery or crematory)



1941 No. 14

# BURIAL (OR REMOVAL) PERMIT

Joseph John P. Rowl
Issued to John P. Rowl  Name of deceased James Mc Govern
Age 10 years 11 months 26 days
Place of death Southboro Mass.
Date of death 19. 1941
Cause of death accidental Proung
Interment at Del Park Cemetery W
Date permit issued 20. 1941
Mart DM 1
Certified by Mahney. M. D.

	/	11	
No		_	

This Coupon to be returned immediately, properly endorsed,

City or Town of Southboro Mass.

Name of deceased Lames Mc Lovern.

If a U. S. War Veteran, specify what war, organization, etc.

#### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

on Welltack Certified by Mysser (Signature of Superintendent, cemetery or crematory)



1941 No. 15

### BURIAL (OR REMOVAL) PERMIT

- AA
Issued to Summer O. Dage
Name of deceased Henry Joseph blapp
Age 75 years 1 months 13 days
Place of death Main Sk., Southborr
Date of death July 4, 1941
Cause of death reart disease probably
Interment at Nount View Com, Shrewsbury
Date permit issued July 5 1941
Certified by Frederick W. Suild M. D.

	/	.1	read .
No.		7	

to Board of Jeans Mass.

City or Town of South County Sou

#### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit

at (Name of cemetery or crematory)

Certified by (Signature of Superintendent, cemetery or crematory)



1941 No. /6

# BURIAL (OR REMOVAL) PERMIT

Issued to B. a. & C. E. Tripts
Issued to D. U. & C. C. Triple
Name of deceased Charles F. Hayes
Age 87 years 4 months 16 days
0 11 5
Place of death Southfow Mass.
Date of death July 8. 1941
Cause of death My ocarditis Chronic
arterio Edergio Chronie
Interment at Woodbrook Cemeting Wobser
Date permit issued Q. 1941
Dave permit issued
Certified by Reland & Newton M. D.
Certified by M. D.

to Brand Of Heatth

to Brand Of Heatth

(Office issuing permit)

City or Town of Southboro Mass.

Name of deceased Charles F. Huges.

If a U. S. War Veteran, specify what war, organization, etc.

#### **ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Woodlook Cenetry Woburn Mass?
(Name of cemeters or crematory)

Certified by Leo Wohnty

(Signature of Superintendent, cemetery or crematory)

Issued to William T. Bulgu
Issued to
Name of deceased George a. Mooney
Name of deceased seage co. Mooney
V
Age JJ years months days
10 \ 0
Place of death Southville Southboro
Date of death July 10. 1941
Cause of death Coronary Thrumbosis
Cause of death Colored Street
Interment at Holy Cross Cemetery Walden
Date permit issued Auly 11, 1941
Date permit issued suly 11, 1941
Certified by James Walsh, M. D.

No	/	7	

This Coupon to be returned immediately, properly endorsed,

City or Town of Soullabore Mass.

Name of deceased George a. Moonly.

If a U. S. War Veteran, specify what war, organization, etc.

#### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

# HOLY CROSS CEMETERY

at MALDEN, MASS.

(Name of cemetery or crematory)

on July 14,

Certified by (Signature of Superintendent, cemerary or crematory)

8. No. 5164

1941 No. 18

# BURIAL (OR REMOVAL) PERMIT

Issued to Matthias Hollandu	
Name of deceased Paul Otenti	
Age ## years months	days
Place of death New Jork City	
Date of death Aug \$10 - 41	
Cause of death Erowing	
Interment at Pural Cemetery	
Date permit issued Cucy 15-1941	
Certified by	_M. D.

City

Nam If a

No	18

# BURIAL (OR REMOVAL) PERMIT This Coupon to be returned immediately, properly endorsed.

(Office issuing permit)	
or Town of Southfors	_Mass
e of deceased Paul Otenti	
U. S. War Veteran, specify what war, organization	n, etc.

#### **ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southboro, Mass.
(Name of cemetery or crematory)

Certified by Matter (Signature of Superintendent, cemetery or cromatory)



1941 No. 19

### BURIAL (OR REMOVAL) PERMIT

Issued to John J. Brown
Name of deceased leters. midulye
Age 47 years months days
Place of death Markhow Rd. Southford
Date of death cury 26, 41
Cause of death Frac & Bull auto accident
Interment at Jumaculate Conception
Date permit issued Cucq. 27, 41
Certified by Walter J. Mahoney M. D.

No.	1	9

This Coupon to be returned immediately, properly endorsed,

City or Town of Mass.

Name of deceased Lawrence War, organization, etc.

#### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

on August 28, 1941

Certified by John F. Fletcher.

Vennoe from	No. 20
Lot no 6 su 15 to Lot 50	pu 3.
BURIAL (OR REMOV	AL) PERMIT
Stub to be retained by officer is	ssuing permit
Name of deceased Margaret E. 7	hompson) Onthun
Ageyears	monthsdays
Place of death  Date of death  Feb 17.	1939
Cause of death  Remove cernains from  hot no sa suit 3 Reval Cern  Interment at  Date permit issued  Oct. 4	V
Certified by	М. D.

1941

R-309—42,500-10-38. No. 5164

etc.\_

# **BURIAL (OR REMOVAL) PERMIT**

This Coupon to be returned immediately, properly endorsed,

# to Board Of Health (Office issuing permit)

City or Town of Southboro, Mass. Mass.

Name of deceased Margaret E, Thompson Onthank

If a U. S. War Veteran, specify what war, organization,

#### **ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southboro, Mass.
(Name of cemetery or crematory)

Certified by Saller 1941.

(Signature of Superintendent, cemetery of Ematory)



#### OFFICE OF

# THE CEMETERY COMMISSIONERS

# SOUTHBOROUGH, MASSACHUSETTS

October 4, 1941

Board of Health Southboro, Mass.

Gentlemen:

Attn: Mr. James Telfer

Will you please issue a Removal Permit, to the undersigned, for the removal of the remains of Margaret E. (Thompson) Onthank from Lot No. 6, Section 15, and to remove the same to and reinter said remains in Lot No. 50, Section 3.

Authorization for this transfer has been received from the legal custodian of the remains.

Very truly yours,

THE CEMETERY COMMISSIONERS

By: Walter M. Offutt, Supt.



1941 22

# BURIAL (OR REMOVAL) PERMIT

Issued to F. A. Corkson
Name of deceased Louis H. Harrington
Age 69 years — months — days
Place of death Mianis Fla.
Date of death /0-31-41
Cause of death
Interment at Rural Cemetery
Date permit issued MN. 8. 1941
Certified by Geo. N. Mar) mell Dade M. D.

No. 22

#### BURIAL (OR REMOVAL) PERMIT

This Coupon to be returned immediately, properly endorsed,

City or Town of Mass.

Name of deceased Harry Harry War, organization, etc.

#### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

atRural Cemetery, Southboro, Mass.
(Name of cemetery or crematory)

onNovember 8, 1941.

Certified by Attu-

crematory)

		OVAL-TRANSIT F	PERMIT	
1-	Place of Death:	F		DARD OF HEALTH
PERM	County Dade		BUREAU OF VIT	AL STATISTICS
d	Precinct MIAMI			2 100
U.Z	City or Town		Number of Permi	
TRA	Name of Deceased LOUIS H.H ARRRINGTON		Age 69 S	ex M Color Wh
AI.	Date of Death 10-31- , 19 41 Name of	f Cemetery or Crematorium	South Borough	Cemetery
VOM	Removal to: City Boston	State	Mass.	
BURIAL. RE	I hereby certify that I have prepared for burial or accordance with the laws of the State of Florida a governing the disposition of dead human bodies.	other disposition, the body of and the Rules and Regulations	the above named of the State Board	deceased strictly in of Health of Florida
EA	Firm Name John J. Skillman Funeral Home		Thillmiss	ase No/28
CCC	A 11	OFTNERAL DI		
Y	A death certificate having been filed in my office, pe	of the body of the above nam	r the burial, transpo	rtation, ceenmon.or
2		GEO. N. MACI	DONELL. M.D.	
E A G		(Signature)	1 . (	Local Registrar
tr.	If the body is embalmed, the licensed embalmer is required to fi			
The Burial-Removal-Transit Permit must be delivered by the undertaker to the sexton or other person in charge of the cemetery where burial to place. This Permit must be endorsed by the sexton and delivered within ten days to the local registrar of the district in which burial takes place there is no sexton in charge of cemetery, the undertaker or person acting as such shall sign the Permit as sexton, write across the face of Permit words, "No person in charge" and return Permit to local registrar.				ich burial takes place. If
O. C.	Body was		on	, 19, in
TV	(STATE WHETHER BURIED, CREMATED OR		C!.	g
HOL	Gemetery		City	State.
0		Signature)		
C C		(SEX	TON OR PERSON IN CH	ARGE)
FRIST	If Body is to be Shipped, fill out the spaces below:			
A T	Shipping Station Miami	, Florida, for		. Name of Cemetery
00	(if obtainable) South Borough	at Boston	ETHER BURIAL OR CRE	Mass.
E	Consigned to		Stato	
\ -	I hereby certify that I permitted the shipment of the		J C	10
C	inereby certify that I permitted the shipment of the	above named deceased mis	day of	, ,
L	(	Signature) O / O /	" cacas	nne
NOTE	N C Thursday C	· ·	OR BAGGAGEMAN OR	EXPRESS AGENT)
	Name of Transportation Company			

1941 No. 21

# BURIAL (OR REMOVAL) PERMIT

0 00
Issued to Summer C. Lage
Name of deceased Melora Fayette & Randall
Age 85 years 5 months 21 days
Place of death (Cordaville ) Southboro
Date of death Oct 22-41
Cause of death Myor architis Chronic
Interment at Center Cerutery Wareham
Date permit issued Oct 22-41
Certified by Roland Newton. M. D.

ST.	
NO.	

This Coupon to be returned immediately, properly endorsed,

to Board of Health
(Office issuing permit)
City or Town of Southboro Mass.
Name of deceased Mary A. Dunn  If a U. S. War Veteran, specify what war, organization, etc.

# **ENDORSEMENT**

(To be filled in by cemetery or crematory official)

disposed of in accordance with its terms
at Frimae. Concept Cem-
(Name of cometery or crematory) on Syt 20, 1947
Certified by Islemon
(Signature of Superintendent, cemetery or crematory)



1941 No. 23

# BURIAL (OR REMOVAL) PERMIT

Issued to F. a. Cookson
Name of deceased George Campbell
Age 84 years 3 months 3 days
Place of death Fayneer Southborn Mass.
Date of death November 28, 1941
Cause of death Face Frait Hijs
Interment at Mulrose Cemetry Brocklas
Date permit issued Dec 1. 1941
Certified by Walter F. Moloney. M. D.

R-309—42,500-10-'38. No. 5164
(1941) No. 24
(17)
BURIAL (OR REMOVAL) PERMIT

Issued to Summer lo. Page
Name of deceased Lorge H. Henderson
Name of deceased
Age 82 years 5 months 25 days
Place of death 20 Petrnan St., Providence, P. O.
Date of death Dec. 12, 1941
Cause of death Cerebral Hemorrhage
Interment at Rural Cemetery
Date permit issued Sec 13, 1941
Date permit issued
Certified by M. D.

	2	11	
No		7	

This Coupon to be returned immediately, properly endorsed,

City or Town of Mass.

Name of deceased Mary Hander Don

If a U. S. War Veteran, specify what war, organization, etc.

#### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southboro, Mass.
(Name of cemetery or crematory)

Dec. 14, 1941.

Certified by (Signature of Superintendent, cemetery or crematory)

# REMOVAL OR BURIAL PERMIT.

The Sexton must indorse the back of this permit and return it to the City Registrar where the burial takes place on or before the fifth day of the month next succeeding. OFFICE OF CITY REGISTRAR, PROVIDENCE, R. I SSION IS HEREBY GIVEN TO REMOVE THE BODY OF Date of Death Place of Death Providence, R. I. Michael J. Mesto

	21
No.	~/

This Coupon to be returned immediately, properly endorsed,

City or Town of Mass.

Name of deceased\_

If a U. S. War Veteran, specify what war, organization, etc.

#### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Center Lemeters
(Name of cemetery or crematory)

(Name of cemetery or crematory

Certified by Gilas Hathaurus

(Signature of Superintendent, cemetery or crematory)

tor:

1942

No. 26

# BURIAL (OR REMOVAL) PERMIT

0 0.
Issued to Summer C. Gage
Name of deceased Tilford F. Bulk.
Name of deceased
Age 46 years 9 months days
Place of death Southbow Mass.
Date of death april 11, 1942
Cause of death Carcinoma lungs and
adjacent tissue
brametin Mr Auburn, Cambridge
Date permit issued 19+2
00 1 m +
Certified by Roland Whenston M. D.

(1942)

No. 2726

#### BURIAL (OR REMOVAL) PERMIT

This Coupon to be returned immediately, properly endorsed,

to Board Of Health	
(Office Assuing permit)	
City or Town of Southfrom	Mass
Name of deceased Silford F. Babk.	
If a U. S. War Veteran specify what war, organization	n, etc.

#### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Mount Quely manufacture of cemetery or crematory)

on Opril 15 1942

Certified by Signature of Superintendent, cemetery or crematory) D.L.

1942

No.\_\_ 25

#### BURIAL (OR REMOVAL) PERMIT

Issued to FA Prokeson	
Name of deceased lange the Scatton	
Age 79 years months 15 da	ıys
Place of death withbow	
Date of death The Mollan	
Cause of death Multiplesmobilem	-
Interment at Runerfill Mass.	
Date permit issued Shift 7/942	
Certified byM.	D.



1942 No. 29.

# BURIAL (OR REMOVAL) PERMIT

Issued to William M. Tighe
Name of deceased Morgaret H. Maley
Age_87_years_/0_months_/4_days
Place of death Boston Rd Southboro
Date of death April 25, 1942
Cause of death Dehydration to abstruction
Interment at Rual cemetery Southboro
Date permit issued april 25 1992
Certified by Hugh Folson M. D.

(1942) No. 30

#### BURIAL (OR REMOVAL) PERMIT

This Coupon to be returned immediately, properly endorsed,

to Southborn Board of Health

(Office issuing permit)	
City or Town of Southborn	_Mass.
Name of deceased Margaret H. maler	
If a U. S. War Veteran, specify what war, organizatio	n. etc.

#### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southboro, Mass.
(Name of cemetery or crematory)

on April 27, 1942.

Certified by (Signature of Superintendent, cemetery of frematory)

19.42 28

## BURIAL (OR REMOVAL) PERMIT

Issued to Fredrick A. Cookson
Me Causland
Name of deceased Barbara Walker (Fennell)
Age 76 years months days
Place of death Oak Hill Rd. Faguille Set.
Date of death 4-20-42  Myocardia bearing ration  Cause of death Chronic Myocarditis
Cause of death Chronic Myocarditis
Interment at Hope Ceruitry Wiester
Date permit issued Apr. 20, 1942
Certified by Albert E. Lemarbe M. D.

#### BURIAL (OR REMOVAL) PERMIT

This Coupon to be returned immediately, properly endorsed,

to Board of Health

(Office issuing permit)	
City or Town of Southbaro	<b>Ia</b> ss
Name of deceased Barbara. W. M. Carslan	ed
If a II S Wer Veteran specify what wer organization	,

#### **ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at	Hope Cemetery.
	(Name of cemetery or crematory)
on	APR 2 2 1942
Certified by	ascar J. Burbank
202122000 23-	(Signature of Superintendent, cemetery or crematory)



1942

No. 2727

## BURIAL (OR REMOVAL) PERMIT

Issued to W. M. Tighe
Name of deceased adds Harvey Harris
Age 87 years 10 months days
Place of death Southfor Mass.
Date of death Cypie 11. 1942
arterio selerosis chronice myscardito
Interment at Pour Country
Date permit issued Opice 13. 1942
Certified by C. W. Smith M. D.



This Coupon to be returned immediately, properly endorsed,

to Boar	d of Health	
	(Office issuing permit)	
City or Town of	Southbro	Mass.
Name of deceased	(a i Harrey)	Harris
	ran, specify what war,	
	, , , , , , , , , , , , , , , , , , , ,	,

#### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

atRural Cemetery, Southborough, Mass.
(Name of cemetery or crematory)

on April 14, 1942.

Certified by Malture of Superintendent, cemetery on crematory)

R-309—42,500-10-38. No. 5164

1942
1942
38

## BURIAL (OR REMOVAL) PERMIT

Name of deceased Berther (Hunter)
Age 67 years 5 months 6 days  Place of death Main Lt Southboro
Date of death May 21, 1942
Cause of death Cerebral Lamorage  Interment at Brooksid, Cem. Stow
Date permit issued May 21, 1942
Certified by David D Shav M. D.

	<b>5</b> .
No	20

This Coupon to be returned immediately, properly endorsed,

to Board (Office issuing permit)

City or Town of Southbow Mars, Mass.

Name of deceased Brillia Richards on If a U. S. War Veteran, specify what war, organization, etc.

#### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

on May 24 42 V
Certified by Olivin A Fletcher

(Signature of Superintendent, cemetery or crematory)

·
Issued to summer 10. Lage
al 01-1.1160.
Name of deceased Harry Minfield Dawin
Age 73 years 5 months 25 days
oft. DI
Place of death Linguama Rd,
Date of death June 11942
Fibrosarcoma of it briefs with
Cause of death metastases to lungs
Interment at Rural Comolery
n //
Date permit issued 400 8, 1942
W/154001
Certified by M. D.
Marlbort

## BURIAL (OR REMOVAL) PERMIT This Coupon to be returned immediately, properly endorsed.

Bound of Health

(Office issuing permit)

City or Town of\_

\_Mass.

Name of deceased

If a U. S. War Veteran, specify what war, organization, etc.

#### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

atRural Cemetery, Southboro, Mass.

(Name of cemetery or crematory)

onJune 9, 1942.

W e-

Certified by

(Signature of Superintendent, cemetery

emetery of grematory)



1942 No.\_\_ 35

### BURIAL (OR REMOVAL) PERMIT

Issued to Frank J. Holey
Name of deceased Frederick andrew Earporter
Age 66 years 6 months 22 days
Place of death Reuse U.H.
Date of death Suce 8, 19 × 2
Cause of death
Interment at Rural Connectory
Date permit issued / 11, 1942
•
Certified by M. D.

City or Town of

No. 35	
--------	--

#### BURIAL (OR REMOVAL) PERMIT

This Coupon to be returned immediately, properly endorsed,

## to Southboro Board of Health

(Office issuing permit)

Southborough,

Mass.

Name of deceased Frederick Andrew Carpenter

If a U. S. War Veteran, specify what war, organization, etc.

#### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southboro, Mass.

(Name of cemetery or crematory)

on june 11, 1942,

Certified by (Signature of Superintendent, cemeter)

ent, cemeter or crematory)

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Form BT-1

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#### BURIAL-TRANSIT PERMIT

SEE OTHER SIDE

Buri	al	Permit	No.	***************************************

ity or	
	Keene
own or	

Full name of deceased Frederick Andrew	Carpenter	
Place of death Keene	Cheshire	New Hampshire
(Town or City)	(County)	(State)
Date of death June 8 19.42 Color White	sex Male	Age
Method of disposal Burial	Rural Cemete:	ry (Yr. Mo. Days)
(Whether burial, cremation, transport.  Town or City Southboro County Midd	ation, storage, etc.) lesex State	(Cemetery or Crematory) Massachusetts
A certificate of death having been filed as requite Frank J. Foley		
(Funeral Director)		
to dispose of body of said deceased as above stated.  Dated at	this 10th day	of June 19 42.
(A.1.1)	o Elmen B. Ch	La 202 De la Salation de la
CEMETERY OR CREMATORY AUTHO	** Company of the Com	ar, Agent City Board of Health) PACE BELOW
Body was on		
(State whether cremated, buried, stored, etc.)		metery or Crematory)
Place	-	exton or person in charge)

This permit after being signed by the Sexton or person in charge (or by the Funeral Director where there is no sexton) must be returned within six days to the Clerk of the town in which the burial takes place.



### BURIAL (OR REMOVAL) PERMIT

Issued to William M. Tighe
Issued to Francisco Transfer of the Issued Transf
Name of deceased Susan Maria Stone
Age 9/ years // months days
Place of death Southboro Mass.
Date of death June 22-194-2
Cause of death attivo selevosis)
Interment at Rural Cemetry
Date permit issued 22-1942
Certified by Fredrich D Guld M. D.

#### BURIAL (OR REMOVAL) PERMIT

This Coupon to be returned immediately, properly endorsed,

to Board of Lealth	
(Once issuing permit)	
City or Town of Southboro	Mass.
Name of deceased Susan M. Stone	
If a U. S. War Veteran, specify what war, organization	n, etc.

#### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

atRural Cemetery, Southboro, Mass.
(Name of cemetery or crematory)

onJune 23, 1942

Certified by

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1942

No.\_\_ 37

## BURIAL (OR REMOVAL) PERMIT

Issued to John J. Brown
Name of deceased Williams. Bagley
Age 55 years months days
Place of death Southbiro Mass.
Date of death / Lly 7, 42
Cause of death Chr. Mysecusdets
Interment at Rural Ceructury
Date permit issued suly 9 19 H2.
Certified by reymond ( ) huson M. D.

to Brand o

No.	3%	7
No		

#### BURIAL (OR REMOVAL) PERMIT

This Coupon to be returned immediately, properly endorsed,

(Office abduling period)	
City or Town of Soluthorn ME	ass.
This of Beal.	
Ivame of deceased of solver	
If a U. S. War Veteran, specify what war, organization,	etc.
Workel Was Gold 10/21901 2	2

#### **ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

on July 9, 1942.

Certified by (Signature of Superintendent, cemetery or crematory)



1942

No. 38

## BURIAL (OR REMOVAL) PERMIT

Issued to Summer C. Gage
Name of deceased Harry Houng
Age 70 years months days
CO HA . States
Date of death tuly 10, 1942
Cause of death Atral regurgitation
Interment at Mural
Date permit issued 11, 1942
Certified by Roland & Hewton M. D.

No	38	
140.		-

## BURIAL (OR REMOVAL) PERMIT This Coupon to be returned immediately, properly endersed,

to Board of Health
(Office issuing permit)
City or Town of Mass
Name of deceased Harry M. Houng.
If a U. S. War Veteran, specify what war, organization, etc
v · · · · · · · · · · · · · · · · · · ·
ENDODSEMENT
ENDORSEMENT
(To be filled in by cemetery or crematory official)
I hereby certify that the body accompanying this permit was disposed of in accordance with its terms
at Rural Cemetery, Southboro, Mass.
on July 13, 1942.
Certified by Katter M. Offitt. 7
(Signature of Superintendent, cemetery or crematory)



1942 No.\_\_\_\_

## BURIAL (OR REMOVAL) PERMIT

Issued to T. Gr. Callanan & Son
(Application)
Name of deceased Clara a. O. Neill
Age 6/ years months days
Place of death Southbord
Date of death July 16, 1942
Cause of death Cancer of liver
Interment at Rural Cemelery
Date permit issued uly 17, 1942
Certified by Roland S. Newton M. D.

No	39

This Coupon to be returned immediately, properly endorsed,

to (Office issuing permit)	
City or Town of Southboxs	Mass
Name of deceased Class G. O'Neille	1
If a U.S. War Veteran, specify what war, organizatio	n, etc.

#### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southboro, Mass. (Name of cemetery or crematory) Certified by (Signature of Superintendent, cemetery or crematory)

## BURIAL (OR REMOVAL) PERMIT

Issued to Am M Tighe
Name of deceased Ellen Booch our Richard
Name of deceased
Age 89 years 11 months 17 days
Place of death Southborn
Date of death July 17 1942
Cause of death arteria Scherosis
Interment at Rural Cometery
Interment at
Date permit issued July 17 1942
Certified by C. W Smith M. D.

No	40	
		1004

This Coupon to be returned immediately, properly endorsed,

(Office issuing permit)
City or Town of Southborn Mass.  Name of deceased Ellen Boulnow Richards
If a U. S. War Veteran, specify what war, organization, etc.

## ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

onTuly 19. 1942.

Certified by (Signature of Superintendent, cemetery or crematory)

1942 No. 4/

## BURIAL (OR REMOVAL) PERMIT

Issued to T. A. Corkson
Name of deceased Sa 4 Wishy
Age years months days
Place of death mulature
Date of death 1112 2 1942
Cause of death dey CEElerwschewsis
Interment at Free Alls Bollon
Date permit issued July 3 1942
Certified by M. D.

n.	4/	
No.		

to Couper to be returned immediately, properly endorsed,

to Couper issuing permit)

City or Town of Couper issuing permit)

Mass.

Name of deceased of a Analytic in the couper is a U. S. War Veteran, specify what war, organization, etc.

#### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at	CREMATORY OF	FOREST HILLS	CEMETERY
	(Name of	cemetery or crematory)	
on	AUG 4-1942	AUG 4	1942
Conti	fied by	uru S.a	Lacuro,
Certi	(Signature of Super	intendent, cemetery or cremato	(Ty) per hi

1942 H2

## BURIAL (OR REMOVAL) PERMIT

Name of deceased ducella Chickering resement
Age 88 years 11 months days Place of death Tarkerille Rd
Date of death Sept 16 1942  Cause of death my or ar like Chronic arters School
Interment at Rural Southbur
Date permit issued Sept 19, 19, 2  Certified by Roland Wewton M. D.

/	,
4	2.
No.	2

This Coupon to be returned immediately, properly endorsed,

to Board of Health
(Office issuing permit)

City or Town of Southborough Mass.

If a U. S. War Veteran, specify what war, organization, etc.

#### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southborough, Mass.

September 20, 1942.

Certified by (Signature of Superintendent, cemetery or genetory)



## BURIAL (OR REMOVAL) PERMIT

0 0
Issued to Mynney O. Dage
Edward Cohenter Wells
Name of deceased Award Open Wells
Age 66 years 9 months 6 days
5L1 D1
Place of death Tlaga A
Q+01 ×
Budden death presumably
Sudden death presumably Cause of death Coronary scientsis
Interment at Rural Cemetery
Date permit issued & 4, 1942
Date permit issued 77, 1742
Certified by Walter F. Mahoney M. D.

## BURIAL (OR REMOVAL) PERMIT This Coupon to be returned immediately, properly endorsed.

to Brand (Office Issuing permit)

City or Town of South Company Mass.

Name of deceased Character Okallo.

If a U. S. War Veteran, specify what war, organization, etc.

#### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southborough, Mass.

(Name of cemetery or cremator

on October 5, 1942

Certified by (Signature of Superintendent, cemetery or cornellary)

1942

No. 44

### BURIAL (OR REMOVAL) PERMIT

Issued to F. a. Cookson
Name of deceased Charles C. Lowell
Age 45 years 3 months 29 days
Place of death Natich Muss.
Date of death 6 4 1 3 . 1 9 4 2
Cause of death Hernorrhage due to ruptured Varies of the stomail Interment at Cural Cerulary
Interment at Rural Cemetery
Date permit issued Oct. 16. 42
Certified by <u>Isadore Colum Ff. Die M. D.</u> Station Hospita

## BURIAL (OR REMOVAL) PERMIT This Coupon to be returned immediately, properly endorsed.

City or Town of Mass. Name of deceased If a U. S. War Veteran, specify what war, organization, etc. Was Id. Was 1

#### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

Rural Cemetery, Southboro, Mass.

(Name of cemetery or crematory)

October 17. 1942

Certified by (Signature of Superintendent, cemetery or

Issued to Busson & Morin
Name of deceased Charles H- Morin
Age 76 years // months 6 days
Place of death Parkerville Rd.
Date of death 2007, 2-1942
Cause of death arterio Schrosis
Interment at Rural Cemetay
Date permit issued Nov 3 - (8% -
Certified by Or. 9- E. LE Marbre M. D.

#### BURIAL (OR REMOVAL) PERMIT

This Coupon to be returned immediately, properly endorsed,

to Board of Health

(Office issuing permit)

City or Town of Southborough, Mass.

Name of deceased Charles H. Morin

If a U. S. War Veteran, specify what war, organization, etc.

#### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

November 5, 1942

Certified by (Signature of Superintendent, cemetery of crymatory)

# L'Union Saint-Jean-Baptiste d'Amérique

A FRATERNAL SOCIETY FOR AMERICANS OF FRENCH DESCENT



HENRI T. LEDOUX, PRESIDENT
NASHUA, N. H.
ARTHUR DAVIAU, VICE-PRESIDENT
WATERVILLE, ME.
GEORGE FILITEAU, SECRETARY
WOONSOCKET, R. I.

ALBERT J. LAMOUREUX, TREASURER GARDNER, MASS.

DR. F. A. RUEST, MEDICAL REVISER
PAWTUCKET, R. I.

EUGENE L. JALBERT, LEGAL ADVISER WOONSOCKET, R. 1.



HOME OFFICE: WOONSOCKET, R. I.

November 12, 1942

Mrs. Valérie Payne, Sec. 80, 104 River Street, Hudson, Mass.

Dear Madam:

You will find enclosed death certificate of Charles H. Morin. You will notice that this document is not signed by the health officer nor the registrar; therefore, this certificate is not considered official. Please have this document signed by proper authorities, and return to this office.

We will not be able to comply with your wishes and return the death certificate to you. This document constitutes the official proof of a death and must remain in the office.

Thanking you for your cooperation in this case, we beg to remain,

Yours truly,

L'UNION SAINT-JEAN-BAPTISTE D'AMERIQUE

Per d'Orcha Y. Nerous

BGH

## BURIAL (OR REMOVAL) PERMIT

Issued to Wm m Tight
Name of deceased of the Elimina Hycle
Age 84 years / months / o days
Place of death Printiss ST
Date of death now 3 1942
Cause of death Hremia
Interment at Rural Swethber
Date permit issued Nov. 4. 1942
Certified by Hugh Folsons M. D.

	,/0
No	40

This Coupon to be returned immediately, properly endorsed,

to Board of Health	
(Office issuing permit)	
City or Town of Southbure	Mass.
Name of deceased Lizzie & Prentiss Hy	de
If a U. S. War Veteran, specify what war, organiza	

#### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southborough, Mass.

(Name of cemetery or crematory)

on November 5, 1942.

Certified by (Signature of Superintendent, cemeter) of crematory)



1942 No.\_\_\_\_

## BURIAL (OR REMOVAL) PERMIT

Issued to Summers O. Dage
Name of deceased Eleanor Telfer
Age 83 years 3 months O days
Place of death & Main St., Southboro
Date of death Dec 4, 1942
Cause of death Myocarditis chronic
Interment at Rural Cemetery
Date permit issued Sec 4, 19#2
Certified by Roland Herton M. D.
Watton May

	1	SY
No	-	

# BURIAL (OR REMOVAL) PERMIT This Coupon to be returned immediately, properly endorsed.

(Office issuing permit)	
City or Town of South bort Mas	Mass.
PA OT A	
Name of deceased Cleanor Selfer	
If a U. S. War Veteran, specify what war, organization, et	tc.
Programme and the second secon	
ENDODGEMENT	
ENDORSEMENT	
(To be filled in by cemetery or crematory official)	
I hereby certify that the body accompanying this perm was disposed of in accordance with its terms	ıit
at Rural Cemetery, Southborough, Mass	

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

(Name of cemetery or crematory)

December 7, 1942.

on

Certified by



1942

No.\_\_\_\_\_\_\_

# BURIAL (OR REMOVAL) PERMIT

Issued to H. L. Richardson  48 Lofagette Vark Lynn.  Name of deceased Kate (Vaine) Scaton
Age 68 years months a days
Place of death Southforn Mass.
7 1 00 010
Date of death December 27-19+2
Cause of death General attrio Schrosis Hypertensia Heart Disease Interment at Sevampust Cerutary Swampust
Interment at Sevampurt Centry Swampurt
11
Date permit issued Dumber 27. 1922
Certified by C. a. Johnson Westlow. D.

	5-1
No	00

to Board of Health	
(Office issuing permit)	
City or Town of Sould tro Mass	Mass.
Name of deceased Male and such	
If a U.S. War Veteran, specify what war, organization	i, etc.

#### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Name of cemetery or crematory)

on 29/942

Certified by Rosselle Superintendent, cemetery or crematory)

Issued to Summer C. Gage.
Issued to C. Sur.
Name of deceased Robert W. Schware
Age 8/ years 6 months /6 days
Place of death Southboro Mass.
Date of death December 27-1942
Cause of death Arterio Sclerosis Heart
Interment at Rural Cernetry Southboro
Date permit issued December 27.1942.
Certified by With F. Westley Wass. M. D.

21	
No	_

to Coupon to be returned immediately, properly endorsed,

to Course Health

(Office issuing permit)

City or Town of Mass

Name of deceased

If a U. S. War Veteran, specify what war, organization, etc.

#### **ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southborough, Mass
(Name of cemetery or crematory)

on December 29, 1942

Certified by Salter . Constitution (Signature of Superintendent, cemetary)

No	4	
4 4 0 4		

This Coupon to be returned immediately, properly endorsed,

Board of Health
(Office issuing permit)
City or Town of South toto Mass.
Name of deceased this Humah G. Buyly
If a U. S. War Veteran, specify what war, organization, etc.

## **ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southborough, Mass.
(Name of cemetery or crematory)

Certified Salar Office (Signature of Superintendent, cemetery of crematory)

R-30942,500-10-'38. No. 5164
(1943) No
BURIAL (OR REMOVAL) PERMIT
Stub to be retained by officer issuing permit
Issued to WW. W. Tughe
Name of deceased Lusan E. (Mann.) Landers
Age 89 years months days
Place of death Southville) Southborn Mass
Date of death Feb 15. 1943
Cause of death Gent. arterio Solerois arterio
Interment at Pairal Cemetry
Date permit issued Feb. 15.19+3
Certified by Waller F. Mohorey. M. D.
. /

Name of deceased

(1943)

No.\_\_

#### BURIAL (OR REMOVAL) PERMIT

This Coupon to be returned immediately, properly endorsed,

If a U. S. War Veteran, specify what war, organization, etc.

#### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

Entombed - to be interred elsewhere in the Spring, (RuralCemetery)

(Name of cemetery or crematory)

on February 17, 1943.

Certified by Kaltu

(Signature of Superintendent, cemetery or crematory

R-309-42,500-10-'38.	No. 5164	page of the	1003
(.	194	3.)	No3.

Stub to be retained by omcer issuing permit
Issued to Sumner O. Gage
Name of deceased adelaide L. Mrye
Age 68 years 10 months 8 days
Place of death Main Sh.
Date of death March 3, 1943
Cause of death Myocardtis chronic
Interment at Rural
Date permit issued March 5, 1943
Certified by Roland Newton M. D. Westhrollan

No	3

to Board of Health

(Office issuing permit)

City or Town of South Office issuing permit)

Mass.

Name of deceased Adelaide T. Olyge

If a U. S. War Veteran, specify what war, organization, etc.

#### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southboro, Mass.

(Name of cemetery or crematory)

on March 6, 1943.

Certified by (Signature of Superintendent, cemetery or commandy)



1943 No. \_\_\_\_\_

## BURIAL (OR REMOVAL) PERMIT

Issued to Les. H. Dugg & Bow
Name of deceased Throdres Olion
Name of deceased
Age 72 years months days
Place of death Southbaro
Date of death 2 22 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Cause of death Caremonia protats
Interment at Mattetoniu, Tura
Date permit issued Mars. 8,1913
Certified by P.S. Newton M. D.

to

No.		

#### BURIAL (OR REMOVAL) PERMIT

This Coupon to be returned immediately, properly endorsed,

(Office iganing normit)

	( O mod additing postato)	
City or Town of	Southboro (Southville) Mass.	
Name of deceased Theodore Olson  If a U. S. War Veteran, specify what war, organization, etc.		
T	NDORSEMENT	
	ed in by cemetery or crematory official)	
(10 30 111	or in by contexty or cromatory chickery	
	hat the body accompanying this permit cordance with its terms	
at Ridges	laws Hatvilown	

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

on Fisch 11 - 1943.

R-309—42,500-10-'38. No. 5164

No.\_\_\_\_ 2.

# BURIAL (OR REMOVAL) PERMIT

7/ 6 411 . (4/ 1.1)
Issued to Vormon E. Morrice (Hopkinton
Name of deceased Surah a. Brett Leighton
Age 98 years 2 months days
Place of death Southborn Mass.
Date of death
Cause of death atrio Schrite Heart Disease
Interment at Mt. auburn Hopkinter Mass.
Date permit issued Feb. 15. 1943.
Certified by Walter F. Mahorey. M. D.

2	
No.	

This Coupon to be returned immediately, properly endorsed,

to Bound & Wealth
(Office issuing permit)
City or Town of Joulthro Mass. Mass.
Name of deceased Larah a. Brut Keighton.
If a U.S. War Veteran, specify what war, organization, etc.

#### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Int.	aubum Cemetery Hoppinton Mass		
(Name of cemetery or crematory)			
on	april 30, 1943		
Certified by	albert E. Boyno (Signature of Superintendent, cemetery or crematory) Carelague		

1943

No.\_\_\_\_\_\_

# BURIAL (OR REMOVAL) PERMIT

0.5/5//
Issued to Dring N. Harper
Name of deceased ardell D. Stone
Age 97 years // months /O days
Place of death Southboro
Date of death Mar 3, 1943
Cause of death arteris Soloutes heart
Interment at Hornfedew, Maire
Date permit issued Warch 57, 1943
Certified by Kaltu F. Machoney, M. D.

1912 6

# BURIAL (OR REMOVAL) PERMIT

Issued to Wm M	Tighe
Name of deceased Ellen 10	(mell) Salmin
Age	months days
Place of death dyman	st Southbur
	0
Date of death Marcs	13 1940
Cause of death gesting	urgelation,
Cause of death	Teste Gracia
Interment at Markhan	Maso
	1
Date permit issued More	ch 15. 1943
Certified by F. J. Speels	
Certified by	М. В.



1943 No.\_

# BURIAL (OR REMOVAL) PERMIT

Issued to John P. Rowe
Name of deceased John J. Hogan
Age 70 years months days
Place of death Pakers Rest John
Date of death April 13, 1943
Cause of death Cembral hermontag
Interment at maculate Conception
Date permit issued Opril 15,1943
Certified by John J. Collins M. D.

No.	7	
LAO.		

This Coupen to be returned immediately, properly endorsed,

to Sound Freath  (Office assuing permit)		
City or Town of Southbord	Mass.	
Name of deceased John J. Hogan		
If a U. S. War Veteran, specify what war, organization	n, etc.	

#### **ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

on Opil 16, 1443

Certified by John J. Flateles (Signature of Superintendent, cemetery or crematory)

1943 8

# BURIAL (OR REMOVAL) PERMIT

CO 1-4
Issued to Summer l. Dage
Name of deceased Frederick, Brown Gleason
Age 90 years 7 months days
Place of death Melendy Rest Home
Date of death May 1, 1943
Cause of death Bronchopneumonia
Cause of death Bronchopneumonia  Maplewood Cemetery Interment at Marlboro, Mass.
Date permit issued May 1 1943
Certified by Roland Knotse M. D.

Certified by

8/
No
140.

# BURIAL (OR REMOVAL) PERMIT This Coupon to be returned immediately, properly endorsed.

(Office issning permit) City or Town of Mass. Name of deceased If a U. S. War Veteran, specify what war, organization, etc. ENDORSEMENT (To be filled in by cemetery or crematory official) I hereby certify that the body accompanying this permit was disposed of in accordance with its terms (Name of cemetery or crematory)

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.



1943 No. 7 7 9

# BURIAL (OR REMOVAL) PERMIT

>1 8 m .00
Issued to Jermon E. Marrill
Name of deceased Engline Blealancy nes Blow
Name of deceased
97
Age 97 years // months days
- ()/ 0
Place of death Balser Rest Home Southboro
Trace of deanity
Date of death May 19, 1943
Date of death May 19, 1943
. 7
Cause of death Caronary Occlusion
Interment at Brewn Turing Mass.
Certirio Selerger Mass.
Interment at Bulevue Autrin Troops ass
)_
Date permit issued May 19, 1943
The point is a second of
Certified by Roland S. Newton M. D.
Certified by Colourd . M. D.

No	9

# BURIAL (OR REMOVAL) PERMIT This Coupon to be returned immediately, properly endorsed,

to South boro, Mass.	
(Office issuing permit)	
City or Town of	Mass.
Name of deceased Encline Bleakury new	Blood

#### ENDORSEMENT

If a U. S. War Veteran, specify what war, organization, etc.

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at	6/311	Cerus		
C. U	1,	(Name of cemetery or cre	matory)	NA ANII SULUMA
on	May	22,1943		
	0	1.1 NI	E 181/	16
Certi	ified by (Signat	ure of Superintendent, ceme	tery or crematory)	7.



1943 No.\_\_/0

# BURIAL (OR REMOVAL) PERMIT

Issued to Frederick A. Cookson
Name of deceased Juthan Frederick Walsworth
Age 83 years months 7 days
Place of death Southborough
Date of death May 25, 1943
Cause of death Chronic Myocarditis
Interment at Mr Cluburu Cemetary, Hopkinton
Date permit issued May 22, 1943
Certified by Toland newton M. D.

	3
No	7

This Coupon to be returned immediately, properly endorsed,

to Dourd of Health
(Office is uing permit)
City or Town of Southborough Mass.
Name of deceased Nachau F. Ubdsworld
If a U. S. War Veteran, specify what war, organization, etc.

#### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at 9	t.	an	bum &	Dem.	etung	Abp	pinta 9	gas
	70		(Name of ceme	etery or	cremator) /		, (	
on	Uh	ay	_ 22	, 1	943			
G .:0 1		6	Plant	2	Bou	un to	Paretah	+
Certified	by_(8	ignature	of Superinten	dent, ce	metery or cr	00	2000 00/1	



1947 No. 10

# BURIAL (OR REMOVAL) PERMIT

Issued to W. W Offutt
MA
Name of deceased alice to Winchester
Age 79 years — months days
Place of death Highland Hospt. U. C.
Date of death May 9. 1973
Cause of death Chronic Myocarditis
Interment at Cural Curitary
Date permit issued 7 - 19-3
Certified by R. Charman Carroll M. D.
A.C.

	19 1
No.	

This Coupon to be returned immediately, properly endorsed, BOARD OF HEALTH

to
(Office issuing permit)
City or Town of SOUTHDULO Mass
Name of deceased Mrs) Olice . Winches lit
If a U. S. War Veteran, specify what war, organization, etc.
ENDORSEMENT
(To be filled in by cemetery or crematory official)
I hereby certify that the body accompanying this permit was disposed of in accordance with its terms
at Rural Cemetery, Southboro, Mass.
(Name of cemetery or crematory)
on June 16, 1943.
Certified by . M. Offices
(Signature of Superintendent, cemetery) or crematory)
If there is no officer in charge undertaker should sign and neturn this stub

MRS. GODFREY BRINLEY
SOUTHBOROUGH, MASSACHUSETTS

6/14/43

Bear Mr. Telfer -I would like to get a tunal permet for Mrs. Non ches Cens ashes. I enclose the death carteficate. as I hope to have the turial tomours, I would appearable getting his certificali al once your tus curly Mann Brunley

# DEATH CERTIFICATE

Registration No. 11-93 Certificate No. 286
City asherble county Brenconche State n.C.
Name of deceased alice L. Winchester (Mrs) col white Sex Female
Date of birth 1864 Date of death May 9.1943Age 79 yrs mos days
Place of death Highland Hospt Former residence Boston Mass.
Name of father hot known Name of mother not known
Cause of death Chronic Myrcarditis Physician R. Charman Carroll.
Registrar of Vital Statistics, Asheville, N.C. do hereby certify that the above is a true copy of the information contained in the death record of alice a. Whichester as filed in the Asheville Health Department 5/14/43.
Witness my hand and official seal this the 2 day of June 1943  Nae M: fee  Registrar of Vital Statistics



# THE CEMETERY COMMISSIONERS SOUTHBOROUGH, MASSACHUSETTS

July 5, 1943.

Board of Health Southboro, Mass.

Gentlemen:

Attn. - Mr. James Telfer

Will you please issue a permit to disinter
the remains of Mrs. Hannah T. Kriss from Grave 9,
Lot 18, Sec. 13, for the purpose of transfering the
same from the Pine Box now in use to a Concrete Vault
and reintering in the above named grave,

We have received authorization for this transfer from the representative of the legal custodian of the remains.

Very truly yours,

THE CEMETERY COMMISSIONERS

By: Walter M. Offutt, Supt.

to

#### BURIAL (OR REMOVAL) PERMIT

This Coupon to be returned immediately, properly endorsed,

City or Town of Mass.

Name of deceased Market War, organization, etc.

### **ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southboro, Mass.

(Name of cemetery or crematory)

July 15, 1943.

Certified by Alter (Signature of Superintendent Cemetery or crematory)



1943 No.

# BURIAL (OR REMOVAL) PERMIT

Issued to Mm M. Tighe
Name of deceased Andrew W. Fitzgrald
Age 77 years // months days
Place of death Marlboro Rd Southboro
Date of death July 23, 1943
Cause of death Chronic Rurenchymatous
Interment at Immaculate Conception marles
Date permit issued July 23, 1943
Certified by C. W. Smith M. D.

This Coupon to be returned immediately, properly endorsed,

to(Office issuing permit)	7.5
City or Town of  Name of deceased	_Mass.
If a U. S. War Veteran, specify what war, organization	on, etc.

#### **ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at June of cemetery or crematory)

on July 26, 1943

Certified by John Thetelese.

(Streature of Superintendent, cemetery or crematory)

James to Henry A Harpin
Issued to Henry A Harpin Name of deceased Frank White Seblane
Age years months / o days
Place of death Baker Rest Home Southbor
Date of death Cuy of 1943
Cause of death Orters - Selevisio
Interment at Musings Marlboro
Date permit issued Output 24 1943
Certified by Xolewa & kerolon M. D.

# 1943

lo.	17	
		Ī

## BURIAL (OR REMOVAL) PERMIT

Issued to Termon E. Morrill
Name of deceased John C. Stone
Age 91 years — months 10 days
Place of death Baker Pert Home Southborough, Mars. Date of death aug. 30, 1943
Cause of death Myocarditis - Chronice
Interment at Mount Ceuburn - Hopelsmilon
Date permit issued Sept 1, 1943
Certified by Roland S. Newton M. D.

No	***************************************

This Coupon to be returned immediately, properly endorsed,

BOARD OF HEALTH	
City or Town of	Mass.
Name of deceased John C. Stone	_Mass.
If a U. S. War Veteran, specify what war, organizatio	n, etc.

#### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

on Schlenber 2, 1943

Certified by Albert E. Boyns Cautaker

(Signature of Superintendent, cemetery or rematory)

1943

## BURIAL (OR REMOVAL) PERMIT

Issued to Draing No. Harper
Name of deceased Clara a. Bubbitt
Age by years 9 months // days
Place of death Southbard, Mars
Date of death Sept. 76, 1943
Cause of death arterio scerosis, chs-
Interment at Southbars. Mass.
Date permit issued Sept. 18,1943
Certified by Baland & newton M. D.

City or Town of

No.	Na	ix
-----	----	----

Mass.

#### BURIAL (OR REMOVAL) PERMIT

This Coupon to be returned immediately, properly endorsed,

(Office issuing permit)

Name of de If a U. S.			specify			organization,	etc.
					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
		END	ORSI	EME	NT		
	(To	be filled in i	y cemetery	or orema	tory offi	cial)	

I hereby certify that the body accompanying this permit

at Rural Cemetery, Southboro, Mass.

was disposed of in accordance with its terms

September 29, 1943

Certified by

(Signature of Superintendent, cemetery or crematory)

## BURIAL (OR REMOVAL) PERMIT

A 1 d
Issued to Summer C. Gage
Name of deceased James It. Robbins
Age 59 years 9 months 6 days
Place of death Boston Road
Date of death Sept 28, 1943
Cause of death Bra plagia spastic
Interment at Rural Cemetery
Date permit issued Sept 29, 1943
Certified by Colomb Hewton M. D.

This Coupon to be returned immediately, properly endorsed,

to(Office issuing permit)	
City or Town of SOUTHBORO	Mass.
Name of deceased James H. Robbins	0
If a U. S. War Veteran, specify what war, organizat	ion, etc.

#### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southboro, Mass.

(Name of cemetery or crematory)

September 30, 1943

Certified by (Superintendent, cemetery or crematory)

Certified by-

1943 No. 2

M. D.

## BURIAL (OR REMOVAL) PERMIT

Issued to Sunner C. Dage
issued to some of the sound of
Name of deceased Elgen J. Powe
Age 73 years months 23 days
Place of death Secrifoot Rok
Deta of double (1943
Budden death, presumably
Cause of death Coronary Sclerosis
Interment at Rural Cemetery
Date permit issued Oct 11, 19 4 3

to.

Name of deceased

#### BURIAL (OR REMOVAL) PERMIT

This Coupon to be returned immediately, properly endorsed,

### BOARD OF HEALTH

If a U. S. War Veteran, specify what war, organization, etc.

#### **ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southboro, Mass.
(Name of cemetery or crematory)

October 12./1943

Certified by (Signature of Superintendent cemetery or crematory)

Issued to Sanduk Slevenson
Name of deceased John House Cas
Age 73 years / months / 3 days
Age 73 years / months / 3 days  Place of death ful summe ) t
Date of death ( 13 1 1943
Cause of death Anance Scaries
Interment at North for Muss
Date permit issued 1943
Cortified by M. D.

This Coupon to be returned immediately, properly endorsed,

(Office issuing permit)
City or Town of SOUTHBORO Mass
1.1 10
Name of deceased from A oughter
If a U. S. War Veteran, specify what war, organization, etc
ENDORSEMENT
(To be filled in by cemetery or crematory official)
I hereby certify that the body accompanying this permit was disposed of in accordance with its terms
at Honard & Cemeleur, Mothbor, Mas
(Name of cemetery or crematory)
on October 16, 1943
Certified by S. S. Stephenson, Suff,
(Signature of Superintendent, cemetery), of crématory)

## BURIAL (OR REMOVAL) PERMIT

0.02.0.
Issued to Cumingham Funeral Service
Name of deceased Junie Quely Woloshy
Name of deceased Minist Grundry McClosky
Age 7/ years 6 months 23 days
Age 7/ years 6 months 23 days
Place of death Farfville Mass.
Place of death Tayville Mass.
Date of death October 22, 1943
Date of death Cook au 145
Cause of death Coronary Disease Sclerosis
Cause of death Consulty Disease Sclerous
Total Carrol Cemetra
Interment at Variat Company
Data paymit is good Oct 24 1943
Date permit issued
Certified by Coland Newton M. D.
dertined by M. D.

This Coupon to be returned immediately, properly endorsed,

	to	(Office issuing permit)	
City o	or Town	of	Mass.
Name	of deces	ased annie E. Quizley)	W. Closhen

If a U. S. War Veteran, specify what war, organization, etc.

#### **ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southboro, Mass.

(Name of cemetery or crematory)

October 25, 1943

Certified by (Signature of Superintendent, Cemeter) or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

1943

## BURIAL (OR REMOVAL) PERMIT

Issued to William W. Tighe
Issued to William M. Tighe  Name of deceased Mrs Colasta (Recoi) Phillips
Age 62 years months days
Place of death Southforo Mass.
Date of death November 8, 1943
Cause of death Carebral hemorrhage
Interment at Rual cemetery southboro
Date permit issued November 9, 1943
Certified by Walter mahonery M. D.

This Coupen to be returned immediately, properly endorsed,

	t	to	BOART	Office issui		on the section		-	
		own of							Iass.
Name	of d	lecease	Cola	esta	CRI	ici	)Ph	llij	so
If a	U. S	S. War	Veteran,	specify	what	war,	organiz	ation,	etc.

### **ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southborough, Mass.
(Name of cemetery or crematory)

onNovemb	en 1	0. 1943.	-6	
Certified by_		alter	MC	Gutt
	Signature	of Superintendent,	, cemetery or cross	atyly)

No.

# BURIAL (OR REMOVAL) PERMIT

Issued to Summer C. Gage
Name of deceased Charles O. Misener
Age 78 years 4 months 9 days
Place of death Winhester St. Southbox
Date of death Dec 7 1943
Cause of death Coronary occlusion
Interment at Mural Cemetery
Date permit issued Dec. 9 1943
Certified by Roland Newtry M. D.

This Coupon to be returned immediately, properly endorsed,

Magg. Name of deceased

If a U. S. War Veteran, specify what war, organization, etc.

#### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

Rural Cemetery, Southboro, Mass.

(Name of cemetery or crematory)

December 10, 1943

Certified by (Signature of Superintendent, cemetery or rematory)

Vo. 23 2

# BURIAL (OR REMOVAL) PERMIT

Issued to John a. Morton
Name of deceased Harriet Worden fowell
Age 72 years monthsdays
Place of death 8/2 Park are Manhatten My.
Date of death
Cause of death (?)
Interment at Burnett Cemetery
Date permit issued Dec 28 1943
Certified by C. W. Lynn (Manhaltan U.Y. M.) D.

No. 27154

This permit must be handed to the Keeper of the Cemetery or Crematory by the Funeral Director in charge of the funeral.

The Certificate

DEPARTMENT OF HEALTH OF THE CITY OF NEW YORK

# BURIAL—CREMATION—TRANSPORTATION PERMIT

	177
of Death having been furnished to	this Department, as required by the Sanitary Code, permission is
s of Damet Wor	den Lowellaged 72 Vrs. Mo. Days,

City of New York, on....

to remove the remain

19 , from

OME AND STORE

Cremation\*
for Burial\* at

C W IYNN M E

MD

Assistant Registrar of Records.

Per .

\* Cross out one.



This Coupon to be returned immediately, properly endorsed.

City or Town of Southforo Mass. Name of deceased Harriet Worden If a U. S. War Veteran, specify what war, organization, etc.

### ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

Burnett Park Cemetery, Southboro, Mass (Name of cemetery or crematory)

December 16

Certified by Signature of Superintendent, cemel or crematory)